

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED

2012 OCT 17 AM 9:21

Office Use Only

FEC MAIL CENTER

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

American Legacy Alliance

ADDRESS (number and street)

PO Box 1964

☒ Check if different
than previously
reported. (ACC)

Alexandria

VA

22314

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00274506

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☒ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12S)	

Election on

in the
State of(d) 30-Day
POST-Election
Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
--	---------------------------------------	--

Election on

in the
State of

5. Covering Period

MM / DD / YYYY
07 / 01 / 2012

through

MM / DD / YYYY
09 / 30 / 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. Timothy R Hathaway

Signature of Treasurer

Mr. Timothy R Hathaway

Date

MM / DD / YYYY
10 / 12 / 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American Legacy Alliance

Report Covering the Period:

From:

MM / DD / YYYY
07 / 01 / 2012

To:

MM / DD / YYYY
09 / 30 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2011		-8.07
(b) Cash on Hand at Beginning of Reporting Period.....	131.1	
(c) Total Receipts (from Line 19)	623.28	2005.66
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	754.38	1997.59
7. Total Disbursements (from Line 31)	616.1	1859.31
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	138.28	138.28
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

Page 3

American Legacy Alliance

From:

MM / DD / YY YY YY YY
07 01 2012

To:

M M / D D / Y Y
09 30 2012

COLUMN B
Calendar Year-to-Date

- 20. Total Federal Receipts**
(subtract Line 18(c) from Line 19)▶

0

623.28

623.28

0

0

623.28

0

0

0

0

0

0

0

C

C

623.28

623.28

0

2005.66

2005.66

0

o

2005.66

0

C

0

0

0

0

0

C

C

2005.66

2005.66

COLUMN B
Calendar Year-to-Date

- [illegible]

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	623.28	2005.66
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	623.28	2005.66
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	616.1	1859.31
37. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	616.1	1859.31

12030912308

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 12

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American Legacy Alliance

Full Name (Last, First, Middle Initial)

A. Charge.COM

Mailing Address 9715 West Broward Blvd
Suite 182

City Plantation State FL Zip Code 33324

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 02 / 2012

Transaction ID : 1

Amount of Each Disbursement this Period

54.95

Full Name (Last, First, Middle Initial)

B. Authorize.NET

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 03 / 2012

Transaction ID : 2

Amount of Each Disbursement this Period

40.55

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address 598 North Washington Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 09 / 2012

Transaction ID : 3

Amount of Each Disbursement this Period

15

SUBTOTAL of Disbursements This Page (optional).....▶

110.50

TOTAL This Period (last page this line number only).....▶

12030912309

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
American Legacy Alliance

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address 599 North Washington Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Bank Fees

001

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 09 / 2012

Transaction ID : 4

Amount of Each Disbursement this Period

10

Full Name (Last, First, Middle Initial)

B. Charge.COM

Mailing Address 9715 West Broward Blvd
Suite 182

City Plantation State FL Zip Code 33324

Purpose of Disbursement
Credit Card Processing Fees

001

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 16 / 2012

Transaction ID : 5

Amount of Each Disbursement this Period

19.95

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address 601 North Washington Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Bank Fees

001

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 17 / 2012

Transaction ID : 6

Amount of Each Disbursement this Period

35

SUBTOTAL of Disbursements This Page (optional).....▶

64.95

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 12

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American Legacy Alliance

Full Name (Last, First, Middle Initial)

A. Charge.COM

Date of Disbursement

MM / DD / YY
08 / 02 / 2012

Mailing Address 9715 West Broward Blvd
Suite 182

City Plantation State FL Zip Code 33324

Purpose of Disbursement
Credit Card Processing Fees

001

Transaction ID : 7

Amount of Each Disbursement this Period

59.03

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Authorize.NET

Date of Disbursement

MM / DD / YY
08 / 02 / 2012

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

001

Transaction ID : 8

Amount of Each Disbursement this Period

40.4

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Bank of America

Date of Disbursement

MM / DD / YY
08 / 03 / 2012

Mailing Address 598 North Washington Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Bank Fees

001

Transaction ID : 9

Amount of Each Disbursement this Period

35

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional).....▶

134.43

TOTAL This Period (last page this line number only).....▶

12030912311

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 12

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
American Legacy Alliance

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address 599 North Washington Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
 Bank Fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

08 / 03 / 2012

Transaction ID : 10

Amount of Each Disbursement this Period

35

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address 600 North Washington Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
 Bank Fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

08 / 07 / 2012

Transaction ID : 11

Amount of Each Disbursement this Period

15

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address 601 North Washington Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
 Bank Fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

08 / 07 / 2012

Transaction ID : 12

Amount of Each Disbursement this Period

10

SUBTOTAL of Disbursements This Page (optional)..... ►

60.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 12

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
American Legacy Alliance

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address 598 North Washington Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Bank Fees

001

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y
08 31 2012

Transaction ID : 13

Amount of Each Disbursement this Period

15

Full Name (Last, First, Middle Initial)

B. Charge.COM

Mailing Address 9715 West Broward Blvd
Suite 182

City Plantation State FL Zip Code 33324

Purpose of Disbursement
Credit Card Processing Fees

001

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y
09 04 2012

Transaction ID : 14

Amount of Each Disbursement this Period

61.22

Full Name (Last, First, Middle Initial)

C. Authorize.NET

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

001

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y
09 05 2012

Transaction ID : 15

Amount of Each Disbursement this Period

40.05

SUBTOTAL of Disbursements This Page (optional).....▶

116.27

TOTAL This Period (last page this line number only).....▶

12030912313

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
American Legacy Alliance

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address 598 North Washington Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Bank Fees

001

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

09 / 10 / 2012

Transaction ID : 16

Amount of Each Disbursement this Period

15

B. Bank of America

Full Name (Last, First, Middle Initial)

Mailing Address 599 North Washington Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Bank Fees

001

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

09 / 10 / 2012

Transaction ID : 17

Amount of Each Disbursement this Period

10

C. Charge.COM

Full Name (Last, First, Middle Initial)

Mailing Address 9715 West Broward Blvd
Suite 182

City Plantation State FL Zip Code 33324

Purpose of Disbursement
Credit Card Processing Fees

001

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

09 / 17 / 2012

Transaction ID : 18

Amount of Each Disbursement this Period

19.95

SUBTOTAL of Disbursements This Page (optional).....▶

44.95

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 12

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American Legacy Alliance

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address 601 North Washington Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Bank Fees

001

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

09 / 16 / 2012

Transaction ID : 19

Amount of Each Disbursement this Period

35

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address 602 North Washington Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Bank Fees

001

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

09 / 24 / 2012

Transaction ID : 20

Amount of Each Disbursement this Period

35

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address 603 North Washington Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Bank Fees

001

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

09 / 28 / 2012

Transaction ID : 21

Amount of Each Disbursement this Period

15

SUBTOTAL of Disbursements This Page (optional).....▶

85.00

TOTAL This Period (last page this line number only).....▶

616.10

12030912315

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

☐ Hand Delivered Date of Receipt

☒ USPS First Class Mail Postmarked
10/13/12

☐ USPS Registered/Certified Postmarked (R/C)

☐ USPS Priority Mail Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label ☐

☐ USPS Express Mail Postmarked

☐ Postmark Illegible

☐ No Postmark

☐ Overnight Delivery Service (Specify): Shipping Date
Next Business Day Delivery ☐

☐ Received from House Records & Registration Office Date of Receipt

☐ Received from Senate Public Records Office Date of Receipt

☐ Received from Electronic Filing Office Date of Receipt

☐ Other (Specify): Date of Receipt or Postmarked


PREPARER

10/17/12
DATE PREPARED